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January 22, 2008

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Commissioner for Patents
PO BOX 1450
Alexandria, VA 22313-1450

Re: Reimbursement for Fees Application 10/756,973

To Whom It May Concern:

Please note that the attorney of record for the above referenced application is John K. Buche, customer number 000061226.

The firm of Weingarten, Schurgin, Gagnebin & Lebovici LLP no longer represents this client and their deposit account should NOT be accessed to pay fees associated with this application.

Enclosed is a copy of the original change of power of attorney form SB82 submitted July 25, 2005 and the original form SB122 submitted September 22, 2006 to add my customer number to the application. Also enclosed is a new form SB122 in case the old one is insufficient.

Sincerely,

/ John K. Buche/

John K. Buche

Enclosures

cc: Weingarten, Schurgin, Gagnebin & Lebovici LLP



PTO/SB92 (01-06)

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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**REVOCATION OF POWER OF
ATTORNEY WITH
NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10756.973
Filing Date	1/14/2004
First Named Inventor	Kenneth Parker
Art Unit	n/a
Examiner Name	n/a
Attorney Docket Number	Makled Landrotin

I hereby revoke all previous powers of attorney given in the above-identified application.

☒ A Power of Attorney is submitted herewith.

OR

☐ I hereby appoint the practitioners associated with the Customer Number:

☒ Please change the correspondence address for the above-identified application to:

☐ The address associated with Customer Number:

OR

☒ Firm or Individual Name JOHN K. BUCHE, BUCHE & ASSOCIATES, P.C.

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jbucher@westernflaw.com

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of applicant or Assignee of Record

Signature

Rudolph W. Schleifer

Name

Rudolph W. Schleifer, President, US Music Corp.

Date

5.19.06

Telephone

847 949 0444

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.306. The information is required to obtain or retain a patent by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is validated to this 3 minutes to completion, including gathering, preparing, and submitting the completed application form to the USPTO. Time may vary depending upon the individual case. Any comments on the request of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22315-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22315-1450.

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PTO/SB/122 (91-96)

Approved for use through 12/31/2008. OMB 0651-0035
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Application**Address to:
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Application Number	10/756,973
Filing Date	1/14/2004
First Named Inventor	
Art Unit	
Examiner Name	
Attorney Docket Number	Guitar Device

Please change the Correspondence Address for the above-identified patent application to:

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OR

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I am the:

- ☐ Applicant/Inventor
- ☐ Assignee of record of the entire interest.
(Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96)).
- ☒ Attorney or agent of record. Registration Number 410,584
- ☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

Signature

Typed or Printed
Name

John K. Buche

Date 9/22/2006

Telephone 858-812-2640

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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